

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, California 95814



October 10, 2003

ALL COUNTY INFORMATION NOTICE I-65-03

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY CHIEF PROBATION OFFICERS
ALL COUNTY CHILD WELFARE SERVICES
PROGRAM MANAGERS
ALL COUNTY MENTAL HEALTH DIRECTORS

REASON FOR THIS TRANSMITTAL

- ☐ State Law Change
- ☐ Federal Law or Regulation Change
- ☐ Court Order
- ☐ Clarification Requested by One or More Counties
- ☒ Initiated by CDSS

SUBJECT: PROMISING PRACTICES GUIDE ON CHILD SAFETY

The purpose of this notice is to share the first compilation of the "Promising Practices Guide" for the prevention and reduction of child maltreatment. This guide is produced pursuant to the federal California Program Improvement Plan (PIP) found in Outcome 2A, Action Step 1. The PIP in its entirety can be found on the Children and Family Services Division web site. This guide will be updated to add promising permanency planning practices and again periodically as new promising practices and programs are identified. The guide contains a brief description of the promising practice along with information regarding how to access more detailed information via contact persons and web links. The document can be found on the California Department of Social Services web site: <http://www.dss.cahwet.gov/cdssweb/>.

If you have any questions, or recommendations for programs and practices that you feel should be added to this list please contact the Child Welfare Policy and Program Development Bureau, Special Projects Manager, Lee Ann Kelly at (916) 445-2890.

Sincerely,

Original Signed by Sylvia Pizzini

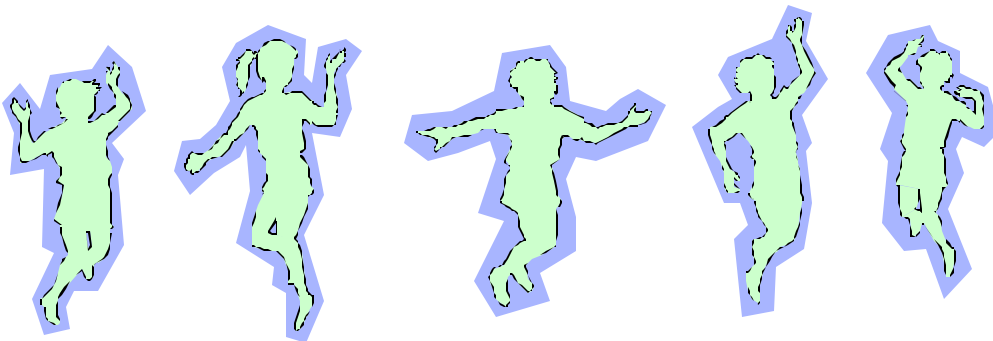
SYLVIA PIZZINI

Deputy Director

Children and Family Services

Promising Practices Approaches To Improve Outcomes for Children and Families

**A Resource and Technical Assistance
Guide for California Counties**



California Department of Social Services
Children and Family Services Division
Child Protection and Family Support Branch

September 2003

Introduction

The California Department of Social Services is pleased to present the first compilation of Promising Practices for counties' use in learning about and connecting to child welfare programs and models that are already up and working in one or more counties. This is the initial step of an evolving and continuing effort to identify and share effective practice strategies, approaches and models. The Promising Practices Guide (PPG) will be updated periodically and will eventually be subsumed within a web-based Clearinghouse of Evidence-based Practice that is being developed as a component of the Child Welfare Redesign.

The information contained in this first issuance of the PPG has been gleaned from several sources including pilot projects supported by statutory/regulatory waivers; foundation-supported initiatives; practices identified in high-performing counties; and local-level applications of national or research-based models. It should be stressed that this compilation is in no way intended to represent a complete inventory of all promising practices underway in California and that we intend to add to the guide on an ongoing basis.

It is the intent of the Department to make the PPG as useful a tool as possible as California moves forward with implementation of the Child Welfare Redesign. Accordingly, the PPG is organized around several major strategic components of the Redesign: Safety Assessment and Differential Response; Family Support; Partnerships to Build Community Capacity; Interagency Cross Systems Coordination; and Permanency for Children and Youth (note: promising practices relating to Permanency will be included in a January, 2004 update to the PPG).

Within each of these **Strategic Components**, the PPG describes one or more **Approaches to Practice** and provides examples of **Specific Programs** within the State that are successfully utilizing the approach. Descriptions of programs include contact information and web links that can be used to obtain more details. In order to make the PPG as useful as possible, it also contains a section that connects the user to a variety of resources for information, training and technical assistance.

We hope you will find this PPG to be a helpful addition to the child welfare services 'toolbox'. We welcome your comments and invite you to submit practices/programs that may be included in future updates of the guide. The PPG is available on the web at <http://www.dss.cahwnet.gov/cdssweb/>. Should you have any questions about the PPG, please contact Nina Grayson, Chief, Child Protection and Family Support Branch at (916) 445-2777 or by e-mail at ngrayson@dss.ca.gov.

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Prevention/Early Intervention

Prevention seeks to strengthen families and protect children by:

- building on family strengths
- addressing concerns that contribute to child maltreatment such as poverty, parental substance abuse or young parental age
- preventing child maltreatment and removal from the home
- preventing reoccurrence of child maltreatment
- encouraging families to seek out support from community private and public providers

Family Resource Centers

Target Population

At risk child and families

Web Links & Contact Information

Strategies Training and Technical Assistance Project
www.familyresourcecenters.net

Northern Center
Youth for Change
6249 Skyway
Paradise, CA 95969
(530) 872-3896
www.youth4change.org

Central Center
Interface
1305 Del Norte Rd., Ste. 130
Camarillo, CA 93010
(800) 556-6607
www.icfs.org

Southern Center
Children's Bureau of Southern California
50 S. Anaheim Blvd., Ste. 241
Anaheim, CA 92805
(714) 517-1900
www.all4kids.org

Description

Family Resource Centers are one of several community approaches in California focused on improving the well-being of children, youth, families, and communities. The goal of Family Resource Centers is to improve outcomes for both families and communities by providing community-based support and services to families and individuals. The centers are conveniently located in neighborhoods and communities to increase accessibility. Family Resource Centers provide an infrastructure for prevention and early intervention for all families. All counties in California have Family Resource Centers.

Essential Components

- Parenting education
- Home visiting
- Child development
- Case management
- Child abuse/neglect prevention
- Peer-to-peer support
- Life skills

Implementation Strategies

- Strong parent/community involvement and support
- Welcoming environment, drop-in availability
- Strengths-based services, supports, and opportunities
- Services determined by community-identified need
- Community improvement
- Public/private partnership

Mutual Assistance Network

Target Population

Under-served community: Del Paso Heights, CA

Setting

Neighborhood/Community based Family Resource Center

Funding Sources

- Work Force Investment Act
- Proposition 10
- First Five
- The California Endowment
- Rockefeller Foundation
- Cowell Foundation
- United Way
- Sacramento County

These services include:

- parenting education
- home visiting
- child development
- case management
- project based-learning
- child abuse/neglect prevention
- peer-to-peer support
- life skills
- employment
- economic assistance
- time and money management
- health and nutrition education
- teen pregnancy prevention
- parent and child school readiness
- grandparent and foster care support
- transportation

Essential Components

- Community involvement
- Family Focused Practice
- Economic Development

Implementation Strategies

Key prevention strategies are based on the Family Support Principles and include:

- Strong community involvement and support
- Welcoming environment, drop-in availability
- Strength-based services, supports, and opportunities
- Services determined by community identified need
- Residents that are hired as staff
- Public/Private Partnership
- Services delivered in a consistent, flexible and holistic manner

Web Links & Contact Information

Mutual Assistance Network
810 Grand Avenue
Sacramento, CA 95838
(916) 927-7694
<http://www.shcowell.org/imap/frc-svcs/MutualAssistNet.html>

Description

From its beginnings, the Mutual Assistance Network (MAN) has demonstrated a commitment to forging partnerships between agencies or individuals that may not have worked together previously, and enlisted the input of the community-at-large in the decision making process. This approach to community development has helped MAN develop strong public-private relationships and to become firmly established as a catalyst for change in an emerging neighborhood system determined to provide services for all residents.

MAN embraces a bottom-up approach to community building and has developed a number of programs that operate through the Family Resource Center Model. These programs are captured within three departments, Economic Development, Family Services, and Youth Services. All of the departments work in an integrated manner, with case plans for families incorporating service components from each area as needed by the child(ren) and family.

Para Los Niños

Target Population

At-risk low income children and families

Setting

15 Neighborhood Centers

Funding Source

Government, donated services, public and private

Essential Components

- Family Resource Centers
- Intensive family preservation
- In-home counseling
- Long-term case management

Implementation Strategies

Family Support Centers: provide both emergency and long-term assistance. Families receive a full range of Para Los Niños coordinated social services:

- including mental health counseling
- in-home and agency-based case management
- parenting education
- health services
- substance abuse intervention
- information and referrals

Intensive family preservation services include: 24-hour crisis intervention, in-home assessment and support, childcare, respite care, housing, substance abuse treatment and health care.

Agency program strategies include:

- Child development centers
- SPIN USA model
- Education initiative
- Literacy projects
- Charter school
- After-school services
- Camps
- Youth services

Web Links & Contact Information

Para Los Niños
845 East 6th Street
Los Angeles, CA 90021
(213) 623-8446
<http://www.paralosninos.org/home.html>

Description

Para Los Niños is a nonprofit family service agency designed to raise at-risk children out of poverty and into brighter futures through positive educational opportunities and support involving families and communities. The agency serves more than 3,500 families each year and more than 1,300 children, ranging from 6 weeks to 18 years old, each weekday. Programs and services are located at 15 sites in Pico-Union, Central, East, West, and South Central Los Angeles, and Ontario.

The Para Los Niños family services agency program goals are:

- To create positive opportunities for at-risk children and youth through education and support involving families and communities
- Raising children out of poverty into a brighter future
- Utilize education as a long-term solution to cyclical poverty
- Promote child safety and preserve families in order to build on the strengths of both
- Serve each child in the context of his or her family
- Build community-based partnerships, responsive to local need

Health Based Services

Target Population

Generally high-risk, vulnerable infants, children, and their families

Description

Health based prevention services are based on the understanding that antisocial behavior that begins early in life is more persistent and has more significant consequences than later occurring antisocial behavior. It is also related to underlying factors that can be responsive to supportive intervention, especially:

- Neurological development of the fetus, especially those born to mothers who engage in behavior that has a higher risk of impairment
- Less optimal material and emotional care-giving
- Maternal life issues such as single parenting, poverty, and multiple children

Health-based prevention services goals include:

- Improve pregnancy outcomes by providing health related services
- Enhance care-giving to improve child health, development, and safety
- Promoting positive maternal life with support, coaching, pregnancy planning and employment

Services often include:

- Home visiting by public health professional and/or paraprofessionals
- Health clinic care
- Parent training and support
- Community services

Many counties in California provide health based child abuse and neglect prevention services.

Essential Components

- Focus on health-based needs and services
- Diverse staff to meet needs of families
- Range of services
- Support by professionals and/or paraprofessionals

Implementation Strategies

- Determine target population
- Identify goals of intervention
- Develop range of services, may contract for services
- Staff hiring and development

Web Links & Contact Information

Department of Health Services
Maternal Child Health Branch
1615 Capitol Avenue, 5th Floor
P.O. Box 942732, MS Code 8300
Sacramento, CA 94234-7320
(916) 650-0300
<http://www.dhs.cahwnet.gov/pcfh/mchb>

Office of Perinatal Substance Abuse
Program Operations Division
California Department of Alcohol and Drug Programs
1700 K Street
Sacramento, CA 95814
(916) 323-4445
www.adp.ca.gov

Black Infant Health Program

Target Population

At risk African American women, infants, children and their families

Setting

Various, including city and county health departments

Funding Source

Department of Health Services, Maternal Child Health Branch

Essential Components

- Assistance in accessing social services and health care
- Provide support and encouragement during pregnancy

Implementation Strategies

- Contract with Community Based Organizations to provide the services
- Partner with local county health departments to implement the program

Web Links & Contact Information

Department of Health Services
Maternal Child Health Branch
1615 Capitol Avenue, 5th Floor
P.O. Box 942732, MS Code 8300
Sacramento, CA 94234-7320
(916) 650-0300

<http://www.dhs.cahwnet.gov/pcfh/mchb/programs/bihp/bihfacts.htm>

Description

The Black Infant Health Program is a community health program dedicated to improving the birth outcomes of African American women and enhancing the overall health and well-being of African American families. Services provided include:

- Home visitation for individual support
- Parenting classes
- Social support
- Referrals for other social services and assistance in accessing health services for both mother and child

The goals of the BIH program are to:

- Improve the health and well being of at risk African-American women and their children
- Reduce deaths of African-American infants, including deaths due to Sudden Infant Death Syndrome (SIDS)
- Foster continuity of health care services during the perinatal period for African-American women and their children

Perinatal Substance Abuse Services

Target Population

Women who are pregnant or parenting and have drug and/or alcohol abuse problems

Setting

Residential, Outpatient

Funding Source

State, Federal, grants, contributions, and fees

Essential Components

- Comprehensive case management
- Child development education
- Parenting skills building
- Transportation
- Cooperative child care
- Health education
- Linkages to medical care and counseling
- Education, vocational and other related services or support

Implementation Strategies

- Recruit local providers
- Develop linkages with other agencies

Web Links & Contact Information

Office of Perinatal Substance Abuse
Program Operations Division
California Department of Alcohol and
Drug Programs
1700 K Street
Sacramento, CA 95814
(916) 323-4445
www.adp.ca.gov

Description

The office of Perinatal Substance Abuse (OPSA) oversees a statewide network of approximately 288 publicly funded perinatal alcohol and drug treatment programs that annually serve over 37,000 pregnant and parenting women accompanied by approximately 56,000 children from birth through age 17. The drug and alcohol perinatal services empower women to achieve and maintain clean and sober living, deliver healthy infants, strengthen family units, and lead productive lives. The services are designed to be gender specific and culturally relevant. Both health and psychosocial assessments are done, and services such as counseling, parenting classes, and referrals to other support services are offered. The Perinatal Services Network includes inpatient and outpatient treatment, transitional living centers and alcohol and drug free housing to help improve the health, safety and well-being of mothers and their children. Many counties in California provide perinatal substance abuse services.

Home Visiting

Target Population

General population, low-income, often young children and their parents

Description

Home visiting sends visitors into the home to provide information, health care, or other psychological or support services. It may be provided to broad-based populations or a defined target population, such as high-risk or vulnerable children and their families. Programs are preventive in nature.

Services may include:

- Diagnostic services
- Parental support
- Parenting training/coaching
- Emotional support to families
- Developmental activities for children
- Homemaking
- Respite care for children
- Job training

Home visiting varies by:

- Agency affiliation
- Funding
- Primary goal
- Education preparation of home visitors
- Intensity and duration of home visiting

All counties utilize home visiting.

Essential Components

- Visits occur in family home
- Increased understanding of child and family and their needs
- Provide tailored services, often reaching families who would often remain unserved
- Preventive in nature
- Connects family to community resources
- Builds relationship between family and visitor
- Trained and supported staff

Implementation Strategies

- Determine goal and target population to be served
- May contract for service provision
- Make key decisions about service delivery
- Residual and accountability systems
- Training and support

Web Links & Contact Information

California Department of Social Services
Office of Child Abuse Prevention
(OCAP)
744 P Street, MS 19-82
Sacramento, CA 95814
(916) 445-2771
www.dss.cahwnet.gov/cdssweb

Birth and Beyond

Target Population

Families with children birth to age 3

Setting

Neighborhood/Community based Family Resource Centers

Funding Sources

CAPIT, CBFRS, PSSF, Tobacco Litigation Settlement, Medi-Cal Administrative Activities First Five-Proposition 10, EPSDT, TCM-Targeted Case Management, CBO Match-Provider Agency Match, AmeriCorps

Implementation Strategies

- Strength-based services, supports, and opportunities
- Public-private partnership
- Multiple options of Home Visiting models to meet various population needs
- Training/quality assurance
- Multi-Disciplinary Teams
- Community driven
- Family Support Collaborative

Web Links & Contact Information

Mutual Assistance Network
Birth & Beyond Family Resource Center
810 Grand Avenue
Sacramento, CA 95838
(916) 498-1000
www.birth-beyond.com

Description

Birth & Beyond offers free and voluntary services to families in their own homes and at local Family Resource Centers. The program seeks to nurture the relationship between parents and their children, and to provide information and support through: home visits, child development education; parent support; parent groups; connections with community resources; information on nutrition, budgeting, health, immunizations, and Play & Grow groups.

Birth & Beyond Program focuses on the primary caregiver and children, but also encompasses the needs of the whole family through home visitation and family resource center services. The program provides services to nine family resource centers.

Essential Components

- Parenting Education
- Child Development
- Case Management
- Child Abuse/Neglect Prevention

California Safe and Healthy Families (CalSAHF)

Target Population

At-risk families and children

Setting

In-home

Funding

California Department of Social Services, Office of
Child Abuse Prevention

There were seven California sites participating in the
CalSAHF Initiative

Essential Components

- Home visiting
- Case management
- Group services

Implementation Strategies

- Orientation and training to staff
- All CalSAHF sites participate in standard process and evaluation
- Outcome evaluation conducted at all sites

Web Links & Contact Information

San Diego State University
Social Policy Institute
6475 Alvarado Road, Suite 236
San Diego, CA 92120
(619) 594-8613 Phone
(619) 594-2016 Fax
tcarrilio@sdsu-spi.org Email
www.sdsu-spi.org

Child and Adolescent Services Research Center
3020 Children's Way, MC 5033
San Diego, CA 92123
(858) 966-7703 Phone
<http://www.casrc.org/projects>

Description

CalSAHF was a state initiative to pilot a three-year home visiting model at seven project sites in California. The purpose of this initiative was to evaluate a service delivery model using para-professional home visitors supervised by clinically trained professionals. The home visitors were supported by an expanded professional team that included a substance abuse specialist, nurse, child development specialist and group specialist in providing services to at-risk families and children.

The CalSAHF Initiative included these evaluation objectives:

- To test whether implementation of the model improved health and development outcomes, improved the maternal life course outcomes, reduced risk for child abuse and neglect, and more effectively tied families into other needed services in the community
- To determine what factors predict early disengagement from the program
- To determine what are the critical features in the professional supervision of paraprofessional home visitors

Mentoring and Parenting Training

Target Population

At risk parents/parents of special needs children

Description

Mentoring provides support to parents, often on a one-to-one basis and provided by other parents. This support may be provided to parents of special needs children. It may be provided in combination with parent training or psycho-educational activities.

Mentoring assists parents with:

- Accessing services on their children's behalf such as special education or behavioral health services
- Putting parenting training concepts into practice

Parent training may be classroom based, center-based, or home-based, individual or group knowledge and skill development. The goals of parent training are to:

- Increase general knowledge of child development
- Increase the ability to discern individual child's cues and respond appropriately
- Develop skills that support the child's safe physical, cognitive and emotional development
- Develop skills for safe, effective intervention in child's behavior

Most counties in California have mentoring and/or parenting training services.

Essential Components

- Strength-based approach
- Uses trained mentors and trainers
- Assists parents to maximize their children's safety and development
- Curriculum based

Implementation Strategies

- Determine goals (meeting needs of general versus specialized parenting needs)
- Develop relationships with community providers
- Select setting (individual, group)
- Research and/or develop curriculum for training of mentors/parents
- Consider support needs such as transportation, child care, nutrition for participants
- Referral and support processes
- Confidentiality and accountability issues

Web Links & Contact Information

California Department of Social Services
Office of Child Abuse Prevention
744 P Street, MS 19-82
Sacramento, CA 95814
(916) 445-2771
www.dss.cahwnet.gov/cdssweb

Shasta County Parent Leadership

Target Population

Parents and public/private agencies

Setting

County-Wide

Funding Source

CBFRS

Essential Components

- Interagency involvement
- Active parent participation/leadership

Implementation Strategies

- Monthly meeting of key stakeholders to include representatives from the Interagency Children's Services, Interagency Children and Family Services Placement, Child Abuse Prevention Coordinating Council, parents involved with, or interested in child welfare, mental health parent liaison, foster parent liaison, a social worker, and other entities
- Training conference on shared leadership for staff and families
- Parent leaders trained to provide presentations and developing a booklet for other parents going through the child welfare system

Web Links & Contact Information

Shasta County Dept. of Social Services
P.O. Box 496005
Redding, CA 96049-6005
Christine O'Neil, Analyst
Coneil@co.shasta.ca.us

Description

The purpose of the Shasta County Parent Leadership Task Force is to plan and implement meaningful parent leadership activities in child abuse prevention and protection services systems.

The following are the goals of the Parent Leadership Task Force:

- Identify and train parents to participate in staff training to increase sensitivity of social workers to the needs of families as well as educate the community about the work of the Children and Family Services Division
- Develop a mechanism—written and/or video—to help parents understand the process and timelines of the CPS system
- Develop a way to let the community know about the many resources available to families in Shasta County
- Identify and train parents to serve as Parent Mentors to support parents and staff throughout the process
- Investigate and make recommendations about the ease and/or difficulty for staff and parents to access services

Young Men as Fathers Programs

Target Population

Fathers on juvenile probation

Setting

Educational settings

Funding Source

Various

classroom and foster healthy youth development through the mentoring process. These are dynamic programs that take into account local needs, while employing resources developed by the California Youth Authority in consultation with departmental staff, outside parenting experts, and wards who are fathers. Probation departments provide program and fiscal oversight.

Implementation Strategies

Development of partnerships among various communities based organizations, and county departments of probation and office of education

Web Links & Contact Information

Young Men as Fathers
Parenting/ Mentoring Program
California Youth Authority
www.cya.ca.gov

Description

The mission of the Young Men as Fathers Program is to stop the generational cycle of violence and delinquency. The program is based on three core principles:

- Child maltreatment is closely linked to later delinquency and can be prevented.
- Young parents must be held accountable for their parenting obligations.
- Being an involved parent is good for self-esteem and can be a motivating factor for a successful life.

Essential Components

The Program offers a curriculum covering self-esteem, health issues, communication, domestic violence, parental roles, family issues, human development, and incarceration. The essential program components are:

- Classroom instruction
- Family activities
- Mentoring

The three program components are designed to complement each other by strengthening parenting knowledge and skills, providing structured family activities that give participants with positive adult role models who reinforce what is learned in the

Respite Care

Target Population

Children, some with special needs, and their families/caregivers

Description

Respite care is provided for children as a supportive and protective intervention. Respite care is time-limited, whether by hours in a day or length of stay if residential. It may be provided in the child's home, a substitute home or be center-based. Care providers may be engaged in activities that reduce risk to the child such as substance treatment, increase family well-being such as employment training, or provide relief for over-burdened caregivers. It may be crisis driven or part of a service plan.

The goals of respite care are:

- Provide safe care for children
- Provide relief for caregivers or to allow them to engage in needed services

Examples of target populations include:

- Infants and toddlers at risk of maltreatment
- Children with special behavioral or health needs
- Children with overburdened caregivers that may be relatives or foster care providers

Essential Components

- Partnerships with families
- Philosophy of family support
- Screened, trained, and supervised child care providers
- Links with other services

Implementation Strategies

- Select target population to be served
- Determine method of care provision
- Build collaboratives and relationships to meet other family needs
- Selection, screening, training of staff and development of center-based location

Web Links & Contact Information

Arch National Respite Coalition
4016 Oxford Street
Annandale, VA 22003
(703) 246-9578
www.archrespice.org

Child Abuse Training and Technical Assistance Centers
1801 East Cotati Avenue
Rohnert Park, CA 94928
(707) 664-3062
<http://www.sonoma.edu/cihs/CATTA>

Santa Clara County: Catholic Charities' Grandparent Caregiver Resource Center On-Demand Respite Services Program

Target Population

Grandparent and other relative caregivers and the children in their care

Setting

Drop in Daycare Center(s)

Funding Source

Grants, donations from local community organizations, corporations, foundations, California Department of Social Services (Kinship Support Services Program), Social Services Agency of Santa Clara County

The goals of the Respite Services Program are to:

- Help grandparent caregivers be successful in maintaining placements, thus diverting the child/ren from foster care.
- Provide an immediate break from the demands of providing on-going care.

Essential Components

- Low-cost, on-demand respite services for relative caregivers
- Available during the week, in the evenings, and on the weekends

Implementation Strategies

- Negotiate discount contract with local child-care centers
- Contract with Community Based Organizations to provide the services

Web Links & Contact Information:

Catholic Charities' Grandparent
Caregiver Resource Center (GCRC)
2625 Zanker Road
San Jose, CA 95134-2107
(408) 325-5164
<http://www.ccsj.org/users/gcrc>

Description

Among the many services the Catholic Charities Grandparent Caregiver Resource Center provides an "on-demand" respite program. The Center offers grandparents a safe place to leave their grandchildren at a 75% discount (\$1.50/hour), for up to five hours/week. This is an essential service for grandparents who need a break "right now" and allows grandparents time to attend to their own medical needs and take advantage of some quiet time. The service is available during the week, in the evenings and on weekends.

Crisis Nurseries: Sacramento

Target Population

At risk families with children generally from birth to age 5

Setting

Child care facility, emergency shelter or in-home

Funding Source

Various

Staff works with the entire family primarily through a case managed service that includes:

- Intake and diagnosis
- Counseling and consulting
- Referrals to services
- Coordinating services
- Client advocacy
- Follow-up on completion of services
- Mediation
- Transportation
- In-home follow-up.

Essential Components

- Respite services
- Parent support services
- Crisis line
- Case management

Implementation Strategies

- Develop proposal for nursery
- Select contractor
- Hire and train staff
- Recruit and train volunteers

Web Links & Contact Information

Sacramento Children's Home
4533 Pasadena Avenue
Sacramento, CA 95821
(916) 679-3606
www.crisisnurseryonline.com

Description

The mission of the crisis nurseries is to prevent child abuse and neglect by providing support to families in crisis through residential respite care for children from birth to five. All nursery services are geared toward supporting and strengthening the role of the parent as primary caregiver to provide a stable nurturing environment in which their children can succeed academically, socially, physically, and emotionally.

Crisis nurseries provide respite care and early intervention services to families who are experiencing a crisis. Ultimately, the program seeks to increase the capacity of parents to be more responsible for themselves and the health and well-being of their children.

Therapeutic Child Care

Target Population

Children with behavioral challenges or developmental deficits, often focused on pre-school ages, infant to 5 years

Description

Therapeutic childcare programs are designed for children with behavioral challenges or developmental deficits. The program provides specially designed activities to provide stimulation, cultural enrichments, and development of motor skills, social skills or to provide opportunities to learn more adaptive behaviors. Therapeutic childcare requires thorough individual assessments to identify the child's needs and craft interventions that are provided by staff on a daily basis. Parents are involved in the assessment and coached to provide the same interventions in the home environment.

Programs should include:

- Safe and comfortable environment to enhance the emotional and physical growth of children
- Large indoor space for movement, including separate space for quiet and active play and interaction
- Enclosed outdoor area for children to play
- Variety of toys and materials that are stimulating and age-appropriate
- Kitchen for food preparation
- Door-to-door transportation for children and parents
- Low child-to-staff ratio
- Low enrollment in setting

Essential Components

- Clear admission criteria and intake procedures
- Multidisciplinary consultation team for evaluation, treatment planning, and progress assessment
- Individualized treatment program, written and updated on each child with ongoing supervision and consultation
- Structured day program for children with routine curriculum and schedule
- Play therapy
- Provision of high-quality nutrition for children and parents
- Parent participation in the program and providing intervention and support for parents
- Separate staff serving and advocating for children and parents
- Established and understanding community support network
- Planning and recommendation/referral for after-care services
- Follow-up inquires on families after leaving program

Implementation Strategies

- Identification of target population and need
- Development of multidisciplinary planning and implementation team
- Establish funding and program parameters
- Site selection and development
- Staff training and development

Web Links & Contact Information

National Clearinghouse on Child Abuse and Neglect
Information
330 C Street, SW
Washington, DC 20447
(800) 394-3366
<http://www.calib.com/nccanch>

Napa Therapeutic Child Care Center (TCCC)

Target Population

Children 0-5 years if the child or family meet the specified criteria

Setting

Child Care Center located on site at the Health and Human Services Agency

Funding Source

Various, including Proposition 10 and CalWORKs funding

Essential Components

- High quality child care with low staff to child ratios
- On site services
- Families and children receive mental health assessments and individualized services

Implementation Strategies

- Contract with community based organizations to provide child care services on site
- Contract with County Office of Education to provide child development and special education services on site
- Collaborate with other agencies to provide services, such as public health nurse, eligibility worker, etc., to be available as needed

Web Links & Contact Information

Napa County
Health and Human Services Agency
Assistant Behavioral Health Care Manager
<http://co.napa.ca.us/>

Description

The Therapeutic Child Care Center is a voluntary program serving children whose parents are involved with the county's addiction recovery programs, mental health programs and child welfare services. In addition, the program serves children who have been dismissed from community childcare settings due to behavioral issues. It is designed to increase child health and reduce mental health and substance abuse issues in the family. It offers assessments and services to children as needs are identified. In collaboration with a child development specialist, mental health specialist, childcare providers and enrichment staff, an individualized plan for each child is developed and tailored to meet the child's needs. The plan includes strategies and interventions tailored for each child and family with evaluation strategies and timeframes. Families also participate in an on-going program study.

Differential Response

Differential response allows a continuum of response to child abuse and neglect referrals that:

- provides is a systematic way to refer families for appropriate resources
- is more individualized and less adversarial
- engages families with community resources to meet their needs
- allows a response that is consistent with the level of safety and risk
- does not depend on substantiation of neglect or abuse to access needed services
- strengthens child and family well-being
- complies with CANRA requirements

Comprehensive Assessment

Target Population

Children and families who interact with child welfare services

Description

The purpose of a comprehensive assessment is to gather information in a systematic fashion to determine the level of child safety and risk, the level of intervention, and to form the basis of the service plan that is developed with families. It is both a dynamic process and a product when it is memorialized at discrete intervals.

Comprehensive assessments may include information regarding:

- Composition of the family as they determine and their relationships
- Family interactions
- Family strengths, including their accomplishments, attributes, skills, goals, values and gifts
- Family resources, including supports
- Family violence, including domestic violence
- Social adjustment, including law abiding behavior
- Developmental issues
- Physical and mental health
- Self-sufficiency, including poverty, employment and education
- Substance use and abuse
- Family culture, including but not limited to ethnicity, language, customs, generational and immigration states, gender and sexual orientation
- Environment, including shelter basic necessities of life, and neighborhood safety
- Community, including resources and assets

The process requires:

- Partnering with children and family
- Multi-disciplinary resources
- Strong relationships
- Strength-based and family focus
- Needs identification

- Shared knowledge and information

Most counties have an assessment process.

Essential Components

- Partnering with families
- Strengths-based, family centered perspective
- Holistic consistent framework
- Training, support, and accountability for use of assessment
- Decisions for intervention and services are based on the assessment

Implementation Strategies

- County selection of process and instrument
- Technical assistance may be helpful to integrate with regular practice
- Training, support and accountability for implementation
- Evaluation of decisions

Web Links & Contact Information

California Department of Social Services
Children's Services Operation Bureau (CSOB)
744 P Street, MS 19-90
Sacramento, CA 95814
(916) 445-2832
www.dss.cahwnet.gov/cdssweb

Child Welfare League of America
440 First Street NW, Third Floor
Washington, DC 20001-2085
(202) 638-2952
<http://www.cwla.org/default.htm>

Children's Research Center
National Council on Crime and Delinquency
426 S. Yellowstone Drive, Suite 250
Madison, WI 53719
(608) 831-6446
www.nccd-crc.org

Receiving Centers

Target Population

Children removed from their birth families or between placements in foster care or group homes

Setting

Child residential

Funding Sources

Various

Essential Components

- Safe residential environment for children
- Availability of responsive multi-disciplinary resources for assessment
- Child welfare has the ability to perform immediate assessments of available relatives for placement
- Availability of appropriate placement resources to meet child's needs
- Emotional support for child
- Ability to meet needs of children with diverse needs, including age, gender, behavior, and culture

Implementation Strategies

- Decision for public or private model
- Development of assessment resources and models to be used
- Receiving center physical plant development
- Hiring, training, and supervision of staff
- Continual development of placement resources to meet the needs of children

Web Links & Contact Information

Contra Costa County Employment and
Human Services Department
Children & Family Services
(925) 313-1583
www.co.contra-costa.ca.us

Solano County
Health and Social Service Division
Child Welfare Services
(707) 421-7444
www.co.solano.ca.us

Description

Receiving centers are designed to support children through the trauma of removal from their birth families and to ease the transition between placements for children disrupted from foster care and group home placements. Social work staff have the opportunity to do a full assessment of potential relatives/caregivers so that an initial emergency placement with strangers may be avoided.

Children receive health evaluations by county public health nurses, mental health assessments by county mental health specialists, short-term care and supervision, crisis support, behavioral management and assessment as well as counseling services. The child's daily living needs are addressed such as meals, baths, clothing, etc.

Structured Decision Making

Target Population

At risk families

Setting

County Social Services Agencies

Funding Source

None

Essential Components

- Response Priority, which helps determine if and when to investigate a referral
- Safety Assessment, for identifying immediate threatened harm to a child
- Risk Assessment, based on research, which estimates the risk of future abuse or neglect
- Family Needs and Strengths Assessment, for identifying problems and establishing a service plan
- Case Planning and Management, which directly respond to the risk and needs assessments
- Case Reassessment, to ensure that ongoing treatment is appropriate
- Workload-based Resource Allocation, assisting agencies to target service resources more efficiently
- The Role of Management Information Systems, to support regular monitoring, planning, research, and evaluation

Implementation Strategies

- The use of research-based risk assessment
- Accurate and consistent classification of families according to the likelihood of subsequent maltreatment

Web Links & Contact Information

California Department of Social Services
Children's Services Operation Bureau (CSOB)
744 P Street, MS 19-90
Sacramento, CA 95814
(916) 445-2832
www.dss.cahwnet.gov/cdssweb

Children's Research Center
National Council on Crime and Delinquency
426 S. Yellowstone Drive, Suite 250
Madison, WI 53719
(608) 831-6446
www.nccd-crc.org

Description

Child welfare workers must make decisions that balance the important values of child safety and family integrity. The Structured Decision Making Project is to provide workers with simple, objective, and reliable tools with which to make the best possible decisions for individual cases. It is also used to provide managers with information for improved planning and resource allocation. SDM uses research-based risk and safety assessment tools.

Structured Decision Making is implemented to:

- provide workers with simple, objective, and reliable tools with which to make the best possible decisions for individual cases
- provide managers with information for improved planning and resource allocation

There are 15 counties that use Structured Decision Making.

Expanding Access to Non-Court Families

Target Population

Vulnerable children and families who do not require public child welfare services

Description

In order for differential response to be effective, there must be services available for those families who do not require the intervention of the Juvenile Court or voluntary child welfare services. There must also be an access route that connects families with community services that:

- Is Community and culturally appropriate
- Is Non-stigmatizing
- Reduces risk to children and supports families
- Is Easily and quickly accessible
- develops relationships between private and public services and forms a continuum of care, maximum child safety and family support

The goals of expanding services are to:

- safeguard and enhance child safety
- support and strengthen families
- vulnerable families are strengthened and will be less likely to need public child welfare services
- increase early intervention capacity

A few counties have developed early intervention community programs to refer families.

Essential Components

- Community services are able to be quickly responsive and supportive to family needs
- Culturally and linguistically appropriate services are available
- Assessment processes that identify families that can benefit from services while safely caring for their children
- Relationship between community and public child welfare services that can create a continuum of care

Implementation Strategies

- Analysis of family support needs, informed by data sources and stakeholder processes
- Bring together community services and public child welfare services
- Develop relationships between community services and public child welfare services
- Development of referral, response, and accountability model
- Resolve issues of confidentiality

Websites and Contact Information

Child Welfare League of America
50 F Street NW, 6th Floor
Washington, DC 20001-2085
(202) 638-2952
<http://www.cwla.org>

Alameda County: Another Road to Safety

Target Population

- Families live in South Hayward or East Oakland
- A child 0-5 resides in the home
- Neglect allegations do not pose a risk of serious harm
- Physical abuse allegations for children 5-17 relate to physical discipline that do not include injuries and
- Physical abuse allegations concerning parent teen conflict ages 12 and older that do not include injuries

Setting

In home

Funding Source

Various

The Another Road to Safety Model is guided by the following principles:

- Child safety is a priority
- Outreach to families when child safety is assured
- Respect for and partnering with parents
- Strengthening and preserving families is a goal
- Community-based, cultural and linguistically relevant services are vital
- Standardized and uniform decision-making is central to improving services and outcomes

Essential Components

- SDM screening and assessment tool
- Family strength-based assessment
- Child welfare liaison
- Family support team

Implementation Strategies

- Build on the strengths of the family culture and communities
- Develop partnerships that will provide supports, protections and opportunities for participating in decision-making and carrying out plans

Web Links & Contact Information

Alameda County Department of Children and Family Services

(510) 208-9740

<http://www.co.alameda.ca.us/assistance/children/about.html>

Interagency Children's Policy Council
San Leandro, CA 94577

(510) 618-3457

<http://www.co.alameda.ca.us/icpc/index.shtml>

Description

Another Road to Safety is an innovative alternative response program that replaces formal, tertiary child welfare services provided by the County Children's Protective Services. Referred families receive in-home supportive services in the early stages of problems or crisis, which have not been deemed appropriate for court involvement. The program is designed to build on both family and community strengths to promote child and family well-being and prevent child abuse. The county partners with a community-based service agency to provide support and services and participate as part of the Family Support Team.

Multi-Disciplinary Teams

Multi-Disciplinary Interview Centers and Teams (MDICs/MDITs)

Target Population

Abused children and their families

Setting

Stand-alone facilities dedicated to multi-disciplinary interviewing or appropriate sites within the county

Funding Source

Local community organizations, corporations, foundations, National Children's Alliance

Essential Components

- Collaboration of law enforcement, district attorneys, social workers, and medical personnel
- Trained child forensic interviewers

Implementation Strategies

- Obtain technical assistance from CATTA or NCA

Web Links & Contact Information

California Institute on Human Services
Child Abuse Technical Training and Technical Assistance Center (CATTA)
Sonoma State University
1801 East Cotati Ave.
Rohnert Park, California 94928
(707) 664-3160
<http://www.cattacenter.org>

National Children's Alliance (<http://www.nca-online.org>)

Description

During a child abuse investigation, MDICs/MDITs bring together law enforcement, district attorneys, social workers, medical personnel and other professionals to conduct a single forensic interview of an abused child. The child forensic interviewer ensures that the child is asked age appropriate questions, and the team ensures that the forensic interviewer gathers accurate and forensically sound information that will be admissible in court. MDICs/MDITs are also referred to as Children's Advocacy Centers.

The goals of the MDICs/MDITs are:

- To limit the number of times child victims have to tell their stories
- To promote a sense of safety and consistency to the child and family
- To enhance interagency cooperation
- To enhance investigations and outcomes for the child and family

Multi-Disciplinary Teams/Drug Endangered Children

Target Population

Drug endangered children

Setting

County law enforcement and child welfare teams plus auxiliary members.

Funding Source

OCJP

Essential Components

- Law enforcement and child welfare services core team
- Auxiliary professionals available
- Response protocols
- Medical professionals that specialize in drug endangered children

Implementation Strategies

- Develop team from law enforcement, child welfare, medical services and legal prosecution
- Develop response protocols
- Comprehensive response from legal and child protection services
- Law enforcement response to drug allegations
- Child welfare response for care and protection of child
- Medical and other needed assessments for child
- Placement and services for child
- Prosecution of adults

Web links & Contact Information

Governor's Office of Criminal Justice Planning
Children's Services Branch
1130 K Street, Suite 300
Sacramento, CA 9581
(916) 324-9100
www.ocjp.ca.gov

Description

Detailed protocols are in place for each aspect of response. Core multi-disciplinary team (MDT) members include law enforcement, CPS, district attorney's office, and medical personnel. Auxiliary team members include mental health, drug treatment, therapeutic, public health, and environmental service professionals. The DEC teams pursue both narcotics cases that involve charges of child endangerment and juvenile dependency cases when children have been present at or exposed to a methamphetamine (meth) lab site.

The DEC program has two overall goals: to break the cycle of child abuse, neglect, and endangerment caused by those who manufacture, use, and sell drugs and to create a collaborative, multidisciplinary response to help children discovered in illegal meth labs. About half of California counties utilize MDTs for drug endangered children.

Family Support and Engagement

Family engagement is the process of joining with children, parents, and other family members to:

- develop a comprehensive, strengths-based family assessment
- create an individualized plan that addresses the family's needs and concerns
- honors the family's self-knowledge and maximizes their rights to self-determination while maintaining safety
- promotes enduring family connections
- ensures coordinated services by involving formal and informal service providers

Family to Family

Target Population

Families and children involved in the child welfare system

Description

The Family to Family Initiative provides an opportunity to reconceptualize and reconstruct the foster care system. It strengthens the network of families available to care for abused and neglected children in their own communities; builds partnerships with at-risk neighborhoods toward that end; uses Team Decision Making to involve birth and resource families in placement decisions; and tracks outcomes for children and families so that child welfare systems can better learn from their experiences.

The goals of Family to Family are:

- Better screen children being considered for removal, determine what services might safely preserve the family, and assess needs of children
- Routinely place children with families in their own neighborhoods
- Involve foster families as team members in family reunification efforts
- Become a neighborhood resource for children and families and invest in the capacity of communities from which the foster care population comes
- Provide permanent families for children in a timely manner

One quarter of California counties are currently implementing Family to Family.

Essential Components

- Recruiting, training and supporting
- Resource families
- Building community partnerships
- Team decision making
- Self-evaluation

Implementation Strategies

- Establish steering committee and perform self-assessment
- Site visit with technical assistance for education and mutual assessment
- Commitment of agency to Family to Family
- Develop implementation plan
- Identify, educate and involve critical stakeholders
- Build support and champion all levels of the organization
- Expect action and monitor progress in all strategies using data
- Train, inform and celebrate

Web Links & Contact Information

California Department of Social Services
Foster Care Support Services Bureau
744 P Street, MS 14-78
Sacramento, CA 95814
(916) 651-7465
www.f2f.ca.gov

Annie E. Casey Foundation
701 St. Paul Street
Baltimore, MD 21202
(410) 547-6600
www.aecf.org/familytofamily

Family Group Decision Making

Target Population

At risk families and families in the child welfare system

- Family alone time in which the family gathers to craft their plan to assure care and protection of their children
- Reconvening of the family and the service providers for presentation of the family's plan and to determine if (and how) the plan needs to be strengthened

Description

- Family Group Decision Making (FGDM) is a family centered, strengths-based, culturally relevant practice approach that recognizes that families receiving services do have valuable insights and can develop meaningful family plans for the care and protection of their own children. Since 1995 this practice has been used in several counties around California. Since 2001, this practice approach has also been implemented in juvenile probation services and mental health services in several counties around the state.

The FGDM model includes these objectives:

- To ensure safety for the child/adolescent
- To engage and empower families to make their own decisions and plans
- To increase participation between families, community organizations and public agencies to ensure child safety and well-being

About half of California counties provide Family Group Decision Making to families.

Essential Components

- Pre-meeting preparation of all participants planning to attend the meeting
- Trained, neutral coordinator/facilitator
- Brings together the nuclear family, the extended family, community member informal and formal service providers

Implementation Strategies

- Develop partnerships between the public agency, community stakeholders and families so that these groups can come together to craft a strategic plan for the development and implementation of FGDM in the local community
- Build agreement within the administrators and manager to assure that this practice approach is in alignment with the agency's vision, mission, and values
- Develop a strategy for training managers, supervisors, line-workers, bench officers and other members of the child welfare system
- Develop supports, including resources, policies, procedures, and trained personnel
- Look for ways to help workers have hope for the families they are working with so that they utilize this practice approach

Web Links & Contact Information

Resource Center for Family-Focused Practice
UC Davis Extension
1632 Da Vinci Court
Davis, CA 95616
(530) 757-8643
<http://humanservices.ucdavis.edu/resource>

Family Group Decision Making
American Humane Organization
http://www.americanhumane.org/site/PageServer?pagename=pc_fgdm

Fresno County

Target Population

Children and Families receiving Child Welfare Services

Setting

County-Wide

Funding Sources

UC Berkeley Title IV-E demonstration research project

Essential Components

- Pre-conference meeting coordination by FGDM coordinator
- Meetings are co-facilitated by social work staff who have been trained in the FGDM process
- Private time for the family to meet without service providers to discuss and develop a family or youth specific plan
- Post-meeting follow-up and evaluation

Implementation Strategies

- Model adapted from the practice design implemented in both Stanislaus and Santa Clara Counties
- Over a two-year period the FGDM efforts were piloted in the Emergency Response units and expanded to be used system-wide

Web Links & Contact Information

Fresno County Children and Family Services

1404 L Street

Fresno, CA 93721

(559) 453-6659

<http://www.fresnohumanservices.org/ChildrenandFamilyServices/EarlyInterventionPrevention/FamilyGroupConference.htm>

Description

In January 1999, Fresno County Family and Children's Services began offering FGDM meetings to families receiving child welfare services and juvenile probation services.

The following were the goals for Fresno County's FGDM meeting process:

- To provide families a facilitated process for making decisions related to the care and protection of their children
- To decrease the number of children and adolescents in out-of-home care.
- To develop partnerships between families being serviced and members of their extended family system, the local community and the agency.

Los Angeles County Family to Family Program

Target Population

Children and Families receiving Child Welfare Services

Setting

County-Wide

Funding Sources

General Fund

Essential Components

- Pre-conference meeting coordination by FGDM coordinator
- Private time for the family to meet without service providers to discuss and develop a family or youth specific plan
- Post-meeting follow-up and evaluation

Implementation Strategies

- As a pilot program which was monitored and developed by an interdisciplinary multi-agency committee
- FGDM has been integrated into the daily practice of the entire agency.

Description

LA Children and Family Services began offering FGDM as a pilot program in 1998 and in 2002 expanded to serve all children and families receiving child welfare services. In 2003 the department began to offer youth that emancipating from the system Emancipation Conferences. Emancipation Conferences are structured similar to FGDM meetings, but focus specifically on the needs of the youth versus the needs of the youth and his/her family.

The following goals were developed during LA's FGDM meetings and Emancipation Conferences:

- To provide families a facilitated process for making decisions related to the care and protection of their children
- To increase opportunities for children to safely remain or reunite with the parents or guardians
- To offer youth who are emancipating from the child welfare system to gather with their family members, extended family member, community members and service providers so that a plan can be developed that enhances the youth's chances for success after he/she is no longer receiving child welfare services

Web Links & Contact Information

Los Angeles County Department of Children and Family Services, Training Section
3075 Wilshire Blvd. 8th Floor
Los Angeles, CA 90010
213-639-4698
magnae@acfs.la.co.ca.us Email
<http://dcfs.co.la.ca.us/FGDM/FGDM.htm>

Kinship Support Services

Target Population

Relative caregivers and the children they are parenting

Implementation Strategies

- Develop information and referral services
- Provide or contract for counseling and /or training
- Arrange for tutoring and mentoring of children/teens
- Provide or contract for post-permanency support services

Web Links & Contact Information

California Department of Social Services
Kinship Care Policy Unit
744 P Street, M.S. 14-66
Sacramento, CA 95814
(916) 657-1858
<http://www.dss.cahwnet.gov/cdssweb/>

Edgewood Center for Children and Families
<http://www.co.sanmateo.ca.us>

Description

These programs provide community-based family support services to relative caregivers and the children placed in their homes. They also provide post-permanency services to relative caregivers that have become the legal guardian or adoptive parent of formerly dependent children. A goal of the program is to ensure that family ties are maintained and increase child safety and stability.

Community workers meet with the caregivers in their homes and at family centers to provide:

- Counseling/training in parent-child relationships and conflict resolution
- Tutoring and mentoring of children/teens
- Case management services
- Peer support
- Parenting education
- Health assessments
- Respite activities
- Clothing
- Transportation
- Recreation activities

About a third of California counties provide formalized Kinship Support.

Essential Components

- Comprehensive, community based services
- Services sensitive to each locale's context and locale
- Family-centered
- The needs of kin care providers are similar to but not the same as non-kin care providers

Kern County Network for Children

Target Population

Children & families, policy makers, local communities

Setting

Family Resource Centers

Funding Sources

- Promoting Safe & Stable Families
- Child Abuse Prevention, Intervention and Treatment/CBFRS
- Proposition 10
- Citizen Review Panel
- Strategies Sub-contract
- California Endowment

Implementation Strategies

- Joint Powers Agreement between County of Kern & Kern County Superintendent of Schools
- Administers PSSF/CAPIT funding on behalf of the Kern County Board of Supervisors
- 21-member Governing Board and 102-member Advisory Board
- Shared Accountability and Responsibility
- Training
- Public-private Partnership
- Frequent and Regular Communications and forums for networking/collaboration
- Leaders in Life youth conference
- Leadership development training program
- Publication of annual report card and web-based data warehouse
- Prop. 10 school readiness initiative

Web Links & Contact Information

Kern County Network for Children
Stephen L. Sanders, Director
307 E. 21st Street
Bakersfield, CA 93305
(661) 631-5566
<http://www.kcnc.org>

Description

County Collaborative serving Kern County policy makers and family resource centers to facilitate collaborative planning and coordination of services to children and families.

Essential Components

- Leadership development
- Family resource centers
- Youth Leadership Conference
- Capacity building & technical assistance
- Training
- Data and research
- Community organizing

Kinship Network

Target Population

Kin caregivers caring for relative children and the children for whom care is being provided

Setting

Community-based sites operated by Kinship Support Services Program (KSSP) Partners

Funding Sources

State General Fund and a combination of county and private sector financing

Implementation Strategies

- The KSSP methodology is to create a public-private partnership with community-based organizations to provide support services to relatives who are caring for relative children who would otherwise enter foster homes or be at risk for dependency or delinquency
- Edgewood Center or any other appropriate agency approved by the department is to provide technical assistance to the KSSP sites and facilitate sharing of information and resources among the local programs

Essential Components

- Community-based family support services for relative caregivers

Web Links & Contact Information

San Francisco County
Department of Human Services
<http://www.ci.sf.ca.us/>

Edgewood Center for Children and Families
<http://www.edgewoodcenter.org/>

Description

San Francisco County, in partnership with the Edgewood Center for Children and Families, provides services focusing on nurturing children, empowering caregivers, and strengthening families. The program is a public/private partnership designed to meet needs of the caregivers and children that are not provided for in public social services. KSSP, which is a voluntary program, emphasizes strengthening the family's ability to maintain a supportive and stable environment as a preferred alternative to out-of-home placement. Services include information and referral, advocacy, training and workshops for caregivers, transportation, recreational activities, long-term planning for children, housing assistance, mental health assessment and support, special events celebrations, summer camp programs, tutoring for children and case management.

Parent-Child Interaction Therapy

Target Population

At risk families

Description

The Parent-Child Interaction Therapy (PCIT) program:

- Provides parents with techniques to build and maintain positive relationships and interactions within the family unit
- Assists with the development of communication skills between parent and child
- Supports and encourages the creation of non-violent solutions and responses for families
- Validates and enhances the individual's role in the family unit

Participation in the PCIT Program will assist families with:

- Improving interactions between parent and child
- Decreasing the incidence of violence within the home
- Establishing and acknowledging roles within the family
- Creating environments that nurture and encourage positive growth and achievement

The PCIT features the most basic form of parent reframing – direct coaching by an interpersonal-relationship therapist who instructs the parent on exactly what to say and how to react during the hour-long session.

Approximately one quarter of California counties provide PCIT.

Essential Components

- Clinical-coaching sessions provided in home or clinic

Implementation Strategies

- Develop trained interpersonal-relationship therapists

Web Links & Contact Information

Child and Adolescent Abuse Resource and Evaluation (CAARE) Center
Department of Pediatrics
UC Davis Children's Hospital
3300 Stockton Boulevard
Sacramento, CA 95820
(916) 734-6614 Phone
<http://news.ucdmc.ucdavis.edu/pcit.html>

Office of Criminal Justice Planning
1130 K Street, Suite 300
Sacramento, CA 95814
(916) 324-9100 Phone
http://www.ocjp.ca.gov/RFP_RFA/rfp-pcit.htm

For the Child

Target Population

Children between the ages of 2 and 8 years old

Description

Parent Child Interactive Therapy (PCIT) was developed to help young children with serious behavioral problems like aggressiveness, defiance, temper tantrums and oppositional behavior. It is also a promising new method for low to moderate severity physical abuse cases involving young children.

It is designed for children who exhibit the following behaviors:

- Difficulty in school, preschool or day care
- Aggression towards parents, siblings or other children
- Sassing back to parents
- Refusing to follow directions
- Frequent temper tantrums
- Swearing
- Defiance

Parents with young children with behavior problems have the help many parents wish for—a trained professional whispering in their ear. The 15-20 week Parent Child Interaction Therapy programs augment both the family-focused mental health and child abuse services.

In our playroom, designed with a one way mirror and audiovisual equipment, a parent wearing a hearing device plays with their child. A therapist observing the interaction from the other side of the one way mirror coaches the parent and helps them make course corrections and practice relationship enhancement and discipline skills.

Essential Components

- Two bilingual Spanish Speaking therapists
- Motor home equipped to provide services at school sites

Implementation Strategies

- Develop trained interpersonal relationship therapists

Web Links & Contact Information

For the Child
4001 Long Beach Blvd.
Long Beach, Ca 90807
(562) 427-7671 Phone
<http://www.forthethechild.org>

Shared Family Care

Target Population

Families with vulnerable children who need intensive support

Description

Shared Family Care provides safety for children and continued family relationships by placing whole families in the homes of community members. Families receive support and services from their mentoring family and a team of professionals while they continue to provide primary parenting responsibility for their children.

Shared family care is unique:

- Whole families reside in another family's home
- Birth families retain primary parenting responsibility
- Around-the-clock parenting program
- Incorporates parent's perspective and input
- Family support team
- Can be used in prevention, reunification or to assist parents in deciding whether or not they will continue to parent
- Often provides housing assistance and aftercare services

The goals of Shared Family Care are:

- Family stability and self-sufficiency
- Income and employment
- Housing
- Child safety and well-being
- Child welfare involvement

Shared Family Care is currently implemented in one county but shows much promise.

Essential Components

- Mentors
- Participant selection and matching process
- Rights and responsibilities agreement
- Family support team and interagency collaboration
- Intensive service
- Housing and aftercare

Implementation Strategies

- Conduct community needs assessment
- Educate key partners
- Assess agency's resources, readiness, experience, capacity and commitment
- Explore funding resources
- Allow 12-18 months for development
- Establish collaborative relationships
- Identify goals and outcomes
- Design program
- Develop policies and procedures
- Establish mentor and recipient family screening procedures and criteria
- Focus groups to target mentor recruitment
- Recruit and train mentors
- Educate potential referral sources

Web Links & Contact Information

National Abandoned Infants Assistance
Resource Center
1950 Addison Street
Suite 104 #7402
Berkeley, CA 94720-7402
Amy Price
(510) 643-8383
<http://aia.berkeley.edu/projects/sfc.htm/>

Wraparound

Target Population

Foster children, probation and severely emotionally disturbed children/youth who are currently in, or at risk of, placement in a moderate to high end group home. (Rate classification level 10 or above)

Description

Wraparound is a family-centered, strengths-based, needs-driven approach to keeping high need children at home, in the community with people that know them and love them. In a facilitated child and family team meeting, formal and informal care providers join with the family to engage in the wraparound process:

- Identify family strengths and concerns
- Identify team strengths
- Create a family vision
- Identify child and family needs
- Prioritize child and family needs
- Develop a safety plan
- Create strategies that are build on family strengths
- Secure commitments
- Document and implement the individualized plan
- Report back and evaluate progress

The result is an individualized plan that continues to evolve as the child's needs and family's needs change.

One half of California counties are engaged in Wraparound Services.

Essential Components

- Family voice, choice and preference at every level of decision-making
- Child and family team
- Flexible funds
- Informal resources
- Safety/Crisis Plan
- No eject, no reject policy
- Care coordination/case management

Implementation Strategies

- The County planning and implementation process must be a collaboration of public and private child serving agencies, other community partners and parents

Web Links & Contact Information

California Department of Social Services
Resource Development & Training Support Bureau
744 P Street, MS 19-87
Sacramento, CA 95814
(916) 445-2890
www.dss.cahwnet.gov/cdssweb

EMQ Children and Family Services
Family Partnership Institute
232 East Gish Road
San Jose, CA 95112
(408) 437-8327
<http://www.emq.org/>

Resource Center for Family-Focused Practice
UC Davis Extension
1632 Da Vinci Court
Davis, CA 95616
(530) 757-8643
<http://humanservices.ucdavis.edu/resource>

Alameda County Wraparound Program Project Destiny

Target Population

Seriously emotionally disturbed children and their families

Setting

Home

Funding Source

Title IV-E Waiver

Essential Components

- Policies, programs and practices for children and families that are responsive to strengths and needs
- Team approach to assessment, case planning and services
- Innovative cross-agency funding strategies

Implementation Strategies

- Family focused services
- Giving families voice and choice

Web Links & Contact Information

Fred Finch Youth Center
Project Destiny
3800 Coolidge Avenue
Oakland, CA 94602-3399
(510) 482-2244
www.fredfinch.org

Description

Project Destiny is a public-private partnership between the Alameda County Department of Child and Family Services and the Flexcare Consortium, a group of three group home providers: Fred Finch Youth Center, Lincoln Child Center, and Seneca Center for Children and Families. Funding flexibility allows Project Destiny to provide intensive services to children with significant behavioral problems, as well as their families. Without wraparound services, these children would most likely need placement in facilities with a higher level of care.

Project Destiny provides flexible services to transition severely emotionally disturbed children from residential care to either their families or to a family based treatment environment. The goal is to achieve reunification and permanency with families, kinship families, foster families, or adoption. This wraparound program is based on a philosophy that services will be provided to strengthen families to allow for the reunification, the child's safety, and healthy school and vocational development.

Court Services

*Courts and child welfare services
share a high level of responsibility
for and to children and their families
that is enhanced by:*

- alignment of court and child welfare personnel
- providing a holistic legal and social response to family needs and concerns
- including child and family advocates as participants in the legal process
- using less adversarial approaches

Child and Family Advocacy

Target Population

Children and families receiving court related child welfare services

Description

Advocacy promotes the rights of children and families. It supports their right to safety, access to and provision of services, and to safely preserve their family. Advocacy provides an active legal voice on behalf of vulnerable and under-represented clients.

Many counties throughout California utilize advocacy for children and families.

Essential components

- Focus on the rights and needs of children and families
- Effective representation in legal settings including criminal and dependency courts

Implementation strategies

- Identification of unmet needs or under-represented constituencies
- Development of resources or skills to provide advocacy
- Monitoring of advocacy and changes in outcomes

Web Links & Contact Information

Child Abuse Training & Technical Assistance Centers
1801 East Cotati Ave.
Rohnert Park
California 94928
www.sonoma.edu/cihs

National CASA Association
100 W. Harrison–North Tower Suite 500
Seattle, Washington 98119
(800) 628-3233
www.nationalcasa.org

Children's Institute International
711 S. New Hampshire Ave.
Los Angeles, CA 90005
(213) 385-5100
<http://childrensinstitute.org>

Judicial Council of California
AOC Center for Families, Children and the Courts
455 Golden Gate Ave., 6th Floor,
San Francisco, CA 94102-3660
(415) 865-7739
<http://www.courtinfo.ca.gov/programs/cfcc/programs/description/casa.htm/htm>

Court Appointed Special Advocate Infant and Toddler Demonstration Project (CASA I &T Project)

Target Population

Children under the age of three

Setting

County CASAs and Child Welfare Service Agencies

Funding Source

Stuart Foundation

Essential Components

Pairing of CASA volunteers with children aged 3 and under early in the process; multi-system collaboration

Implementation Strategies

- Collaborate with CASAs to obtain funding to implement the program
- Establish multidisciplinary teams of experts, including CASAs, infant mental health therapists and Early Head Start staff to identify and address critical issues within the family

Web Links & Contact Information

Judicial Council of California
AOC Center for Families, Children and the Courts
455 Golden Gate Ave., 6th Floor,
San Francisco, CA 94102-3660
(415) 865-7739
<http://www.courtinfo.ca.gov/programs/cfcc/programs/description/casa.htm/htm>

Description

The CASA I & T Project is a four-year study designed to explore the effect of the appointment of CASA volunteers on dependency cases of children under the age of the three.

The goals of the CASA I & T Program are:

- More timely permanent placements
- Higher rate of kinship guardianships
- Higher rate of adoptions
- Lower re-entry rate for children who have been reunified with their birth parents
- Collections of information about the successes and failures of efforts at permanent placement, which would inform (a) those involved in legislative advocacy and (b) the judges and social workers in the demonstration counties about the real availability of local support services

Drug Dependency Courts

Target Population

Parents whose children have been removed and for whom substance abuse has been identified as a contributing issue

Implementation Strategies

- Institute collaboration among judicial officers, defense and prosecuting attorneys, and substance abuse recovery professionals
- Arrange immediate access to substance abuse recovery programs for participating parents

Web Links & Contact Information

Department of Alcohol and Drug
Office of Drug Courts Programs
1700 K Street, 5th Floor
Sacramento, CA 95814
(916) 323-7230
www.adp.ca.gov

California Drug Court Project
www.courtinfo.ca.gov/programs/drugcourts

National Drug Court Institute
www.ndci.org/home.htm

Description

Drug Dependency Courts adjudicate offenders who are parents with drug and/or alcohol addictions. The Drug Dependency Courts address substance abuse issues that contribute to the removal of children from their parents. It is a therapeutic approach to criminal justice where offenders are required to undergo drug treatment, frequent drug testing and close monitoring, which includes regular court visits to monitor the parents' adherence to their recovery plan, and court-administered incentives and sanctions.

Cases of substance-abusing adult defendants whose children have been removed are heard either in a specialized court or in the same court as their children's dependency proceedings. With important local variations, the children's dependency status is directly linked to their parents' recovery.

Drug Dependency Courts are a relatively new development in California but are spreading.

Essential Components

- Integration of alcohol and other treatment services with justice systems
- Use of a non-adversarial approach
- Early identification and prompt treatment
- Continuum of alcohol and other drug treatment services is available
- Frequent monitoring to determine abstinence or use
- Ongoing judicial interaction with participant

Ventura County Dependency Drug Court

Target Population

Parents whose children have been removed and for whom substance abuse has been identified as a contributing issue

Setting

County Superior Court and local substance abuse programs

Funding Source

Various federal and state sources

The goals include:

- Increased access to substance abuse treatment programs
- Provide the earliest possible intervention for infants prenatally exposed to alcohol or drugs
- Provide a safe environment for the infants while strengthening the ability of their family to care for them

Essential Components

- Substance abuse treatment services

Implementation Strategies

- Institute collaboration among judicial officers, defense and prosecuting attorneys, other county agencies, substance abuse recovery professionals, and community based organizations
- Arrange increased access to substance abuse recovery programs for participating parents

Web links & contact information

Superior Court of California
County of Ventura
Hall of Justice
800 South Victoria Avenue
Ventura, CA 93009

Department of Alcohol and Drug
Office of Drug Courts Programs
1700 K Street, 5th Floor
Sacramento, CA 95814
(916) 323-7230 Phone
www.adp.cahwnet.gov/drgcourt.asp

California Drug Court Project
<http://www.courtinfo.ca.gov/programs/drugcourts>

National Drug Court Institute
<http://www.ndci.org/home.htm>

Description

Dependency Drug Courts (DDC) adjudicate offenders who are parents with drug and/or alcohol addictions. In Ventura County, the DDC is a program for mothers who have given birth to babies prenatally exposed to alcohol or drugs. It includes an initial assessment, weekly court supervision, coordinated case management, increased access to treatment, development of transitional housing, child development monitoring and intervention services, and a six-month follow up family assessment. Participation is voluntary and subject to the discretion of the judge.

Mothers in the Ventura County program are assigned a Children and Family Services social worker who coordinates all needed support services and provides ongoing case management. Agencies providing services to these mothers and infants meet regularly to discuss progress towards goals, areas for intervention and other needed services.

Mediation

Target Population

Dependency court involved families

Description

Child welfare mediation is an approach to resolving disputes in which the parties attempt to resolve their differences through a non-adversarial bargaining procedure. Parties engage in seeking mutual solutions rather than promoting their own position and attempting to rebut the positions of other parties. The process involves a mediator, a neutral third party, with no decision making power and no investment in the outcome. The mediator's role is to guide the parties in exploring the issues, developing possible solutions and alternatives, considering the proposals and coming to an agreement.

Mediation may be used for:

- Developing permanency plans for children
- Resolving disputes over supervision, placement, parental visitation, family reunification
- Resolving conflicts among parents, relatives, and other extended family members concerning the child
- Resolving conflicts among foster care providers and children's court-appointed advocates concerning the needs of children while they are in placement

Participants in the mediation process may include:

- Mediator
- Child welfare authorities
- Parents
- Relatives
- Foster care providers
- Court appointed advocates
- Attorneys

Mediation often results in agreements that are more detailed and creative than litigated solutions, cost savings by trial avoidance, increased parental involvement, and reduced time in out-of-home care for children.

Many counties use mediation.

Essential Components

- Mediator, a neutral third party trained to guide the process
- Support of the judiciary and legal community
- Participation of all parties needed to come to agreements
- Discussion of legal and social service issues
- Agreement is presented to the judge for final approval

Implementation Strategies

- Dependency court must be involved and supportive of mediation
- Representation of child welfare agencies, legal representation groups for children and parents, and advocates meet to develop parameters of the program
- Issues to be addressed in mediation are defined and referral process established
- Mediators are hired and trained

Web Links & Contact Information:

Judicial Council of California
Administrative Office of the Courts Center for Families,
Children and the Courts
455 Golden Gate Avenue, 6th Floor
San Francisco, CA 94102-3660
(415) 865-7739
<http://www.courtinfo.ca.gov/programs/cfcc>

Partnering to Build Community Capacity

Public and private agencies join together at state, county and neighborhood levels to build the ability of communities to meet family needs

- shared knowledge
- mutually responsible and accountable
- contribute and share resources to build services
- identify and fill service gaps

Children's Planning Councils

Target Population

Children and family serving agencies

Web links and contact information

Child Abuse and Technical Assistance Centers
1801 East Cotati Ave.
Rohnert Park, CA 94928
(707) 664-3062
www.cattacenter.org

Description

Children's planning councils are convened when there are multiple agencies planning and providing services. The focus of the councils is to develop cross-system strategic planning to best serve children and families. The goal is to increase integration, coordination, and accessibility of services to improve outcomes.

Planning councils are generally broad in their scope. They seek to coordinate multiple planning processes. They also focus on equity and fairness in distribution of services and attention to outcomes for all children and families.

Essential Components

- Inclusive representation of public and private agencies serving children and families
- Strong family representation
- Focus on outcomes
- Use of data
- Knowledge of funding sources
- Strategic planning across systems

Implementation Strategies

- Systems must be committed to working together
- Broad representation is sought and brought together
- Agreement on outcomes
- Availability and analysis of data
- Collapsing multiple strategic planning processes
- Maximizing current funding and seeking new funding

Alameda Children's Planning Council

Target Population

Families whose children were in, or are at risk for out of home placement

Setting

Group homes, school sites, family resource centers

Funding Sources

- PSSF
- County general funds
- Private foundation funding for services/special projects

Implementation Strategies

Three specific implementation strategies are:

- Public service reforms through service integration and outcome focused demonstrations
- Community development initiatives
- Expanding direct service activities including:
 - a) Reform services at the high end with the dual objectives of improving outcomes and generating savings that could be reinvested
 - b) Investments in community development through the relocation of front line services to neighborhoods while supporting community capacity building
 - c) Expanded access through the development and support of bridge services such as school-based health clinics, Healthy Start, school-based dental programs and the promotion of health insurance reform and coverage through Healthy Families and Medi-Cal reform

Web Links & Contact Information

Interagency Children's Policy Council of Alameda County
Health Care Services Agency
Administration
1850 Fairway Drive
San Leandro, CA 94577
(510) 618-3457
Gary.Thompson@acgov.org Email

Description

The Alameda County Interagency Children's Policy Council (ICPC) was established in 1994 when Alameda County was designated as an AB 1741 (The Youth Pilot Project) county. The purpose of the council is to improve outcomes for children and families through major interagency systems reform. Key county policy makers, community stakeholders, and ICPC members reached consensus to focus on reducing out of home placements for at risk children.

Essential Components

- Community Engagement and Neighborhood initiatives
- More children living safely at home with more family support
- Integrated family focused, outcome driven system

Kern County Network for Children

Target Population

Children & families, policy makers, local communities

Setting

Family Resource Centers

Funding Sources

- Promoting Safe & Stable Families
- Child Abuse Prevention, Intervention and Treatment/CBFRS
- Proposition 10
- Citizen Review Panel
- Strategies Sub-contract
- California Endowment

Implementation Strategies

- Joint Powers Agreement between County of Kern & Kern County Superintendent of Schools
- Administers PSSF/CAPIT funding on behalf of the Kern County Board of Supervisors
- 21-member Governing Board and 102-member Advisory Board
- Shared Accountability and Responsibility
- Training
- Public-private Partnership
- Frequent and Regular Communications and forums for networking/collaboration
- Leaders in Life youth conference
- Leadership development training program
- Publication of annual report card and web-based data warehouse
- Prop. 10 school readiness initiative

Web Links & Contact Information

Kern County Network for Children
307 E. 21st Street
Bakersfield, CA 93305
(661) 631-5566
<http://www.kcnc.org>

Description

County Collaborative serving Kern County policy makers and family resource centers to facilitate collaborative planning and coordination of services to children and families.

Essential Components

- Leadership development
- Family resource centers
- Youth Leadership Conference
- Capacity building & technical assistance
- Training
- Data and research
- Community organizing

Los Angeles County Planning Council

Target Population

Children and Families System Wide

Setting

County-wide/community based locations

Funding Sources

- Combined public and private funding
- County department allocations
- Grants, public and private foundations
- Partners with LA county 1st 5

Implementation Strategies

- Collaborative funding
- Inclusive decision making
- Shared accountability and responsibility
- Data collection and analysis
- Public-private partnership
- Frequent and regular communications
- Priorities set by communities
- Investment in prevention

Web Links & Contact Information

Los Angeles County Children's Planning Council
Kenneth Hahn Hall of Administration,
B-26 500 W. Temple Street
Los Angeles, CA 90012
(213) 893-0421 Phone
(213) 680-1415 Fax
<http://www.childpc.org/aboutus.asp>

http://www.childpc.org/resource-files/childrens_scorecard02.pdf

<http://www.childpc.org/resource-files/makingthechange.pdf>

<http://www.childpc.org/resource-files/tenlessons.pdf>

Description

The Los Angeles Children's Planning Council is a cross-system vehicle advocating reform of children's service systems. With relatively few resources, the CPC has quietly changed LA County's discussion about children. Ten years after its creation, the CPC is now about service integration, decentralization, data driven planning, focused on outcomes, and inclusive decision-making.

Essential Components

- Independent county agencies now working closely together
- Move from isolated non-county agencies to multi-faceted, deep collaborations
- Less focus on funder-imposed processes to one on outcomes for children
- Collection and use of data to help make programs more effective and not simply meet program requirements

From thinking and acting at a county-wide level, to increased attention to services and interventions that reflect unique geographic circumstances.

Indian Child Welfare Act Roundtables

Target Population

Indian children and families: local Tribes, child welfare agencies, dependency courts

Description

A number of California counties and local Indian Tribes have convened Indian Child Welfare Act (ICWA) working group/roundtables. The purpose of the roundtable is to provide a forum for discussion and the resolution of issues regarding implementation of ICWA. The roundtables are an approach that reaches a diverse group of stakeholders involved with the implementation and compliance of ICWA. The roundtables often consist of local juvenile court judges/referees/commissioners, local tribes, county social services and probation staff, county counsels, law enforcement and others that may impact Indian Children and Families in the child welfare or delinquency system.

One county has used its working group to develop a list of qualified expert witnesses. Several others have developed local ICWA protocols for working with Indian children and families.

About one quarter of California counties are using ICWA Roundtables.

Essential Components

- Involvement of Tribal leadership
- Community collaboration
- Participation/leadership

Implementation Strategies

Three specific implementation strategies are:

- Monthly meetings of key Tribal and county representatives
- Protocol development to promote proper application of ICWA (noticing requirements, active efforts, etc.)
- Promote Indian children's connections to tribal community

Web Links & Contact Information

California Department of Social Services
ICWA Specialists
744 P Street, MS 19-87
Sacramento, CA 95814
(916) 445-2890
www.dss.cahwnet.gov

Sacramento County Indian Child Welfare Act Committee

Target Population

Indian children and families; tribes and Tribal organizations working with the County; the County child welfare agency; children's attorneys/advocates

Setting

County-Wide

Funding Source

Participant organizations support

Implementation Strategies

- Meetings of key Tribal and county representatives are held six times per year
- Protocol development to promote proper application of ICWA (noticing requirements, active efforts, etc)
- Promote Indian children's connections to Tribal community

Web Links & Contact Information

Superior Court of California
County of Sacramento
Sitting as the Juvenile Court
William R. Ridgeway Family Relations Courthouse
3341 Power Inn Road, Department 131
Sacramento, California 95826
(916) 875-2531

Description

Susan L. Aguilar, Juvenile Court Referee, convened the Indian Child Welfare Act Committee to provide a forum for discussion and the resolution of issues regarding implementation of ICWA in Sacramento County. Since there are no tribes with a land base located in Sacramento County, representatives from tribes who have cases heard by the County attend. Representatives from Tribal organizations, county social services and probation staff, county counsels, children's attorneys and others that may impact Indian children and families in the child welfare or delinquency system attend.

The committee is developing written procedures for bench officers to use when handling ICWA cases as well as an ICWA checklist for county staff that will be a single document that identifies ICWA compliance issues.

Essential Components

- Involvement of Tribal leadership
- Community collaboration
- Participation/Leadership

Public-Private Partnerships

Target Population

Often families receiving multiple public and private services

Description

Public-private partnerships bring together combinations of public and private service providers that serve targeted populations with common needs or high service consumption. Goals of public-private partnerships include:

- Coordinated delivery of services for the greatest benefit to families
- Holistic approach to individuals and family unit
- Provision of a comprehensive range of services locally
- Rational allocation of resources at the local level to meet local need

Agencies participate in the collaborative on a voluntary basis to better serve families and to acquire funding that requires collaboration. Relationships may be informal or institutionalized through memorandum of understanding or contracts.

Staffing, which may include families, are held to identify needs, develop individualized solutions, make commitments, and be mutually accountable.

Most counties have developed public-private partnerships to meet the needs of families in their community.

Essential Components

- Public agencies and private agencies are represented
- Agencies meet together as equals
- Common focus to meet family need

Implementation Strategies

- Identification of agencies frequently involved on providing services
- Bring agencies together to explore issues on how to serve families more effectively
- Agreements reached regarding confidentiality issues, family referrals, staffing, and mutual accountability
- Agencies meet together regularly

Contact Information

Child Welfare League of America
440 First Street NW, Third Floor
Washington, DC 20001-2085
(202) 638-2952
<http://www.cwla.org/default.htm>

Annie E. Casey Foundation
701 St. Paul Street
Baltimore, MD 21202
(410) 547-6600
www.aecf.org/familytofamily

Orange County's FaCT: Families and Communities Together

Target Population

At risk families & local communities

Setting

Family Resource Centers (FRC)

Funding Source

Federal, State, and County funds including Promoting Safe and Stable Families, OCAP, Office of Criminal Justice Planning, and the Children and Families Commission of Orange County

Implementation Strategies

- FRCs are unique to the local communities of which they are a part
- Outreach, Orientation and training to staff and community members
- Public/ Private Partnership
- Child Welfare Services provides staff and funding to support the family resource centers
- Collaborative decision-making

Web Links & Contact Information

Orangewood Children's Foundation
Families and Communities Together Program
1200 North Main Street, 7th Floor, #170C
Santa Ana, California 92701-3518
(714) 480-6302
www.factoc.org

Description

FaCT is a partnership between: County of Orange Social Services Agency, Orangewood Children's Foundation supporting Orange County family resource centers operated by community-based collaboratives. FRCs serve as a comprehensive and integrated service deliver system that is informed and shaped by respective communities in partnership with community and faith based organizations, cities, school districts, and Orange County Social Services.

Essential Components

- Family centered treatment planning process
- FRCs in partnership with community & faith based organizations, cities, schools, and county agencies
- FaCT Community Forum will engage in a facilitated open process to chart its course
- Community activities and involvement
- Strong public, private, community and business partners

The Yolo Multi-Agency Review Team (YMART)

Target Population

At risk pregnant and/ or parenting families in Yolo County

Setting

Fifteen social services agencies/ departments are represented in the YMART collaborative (e.g., CHDC Head Start/ Early Head Start for Yolo County, CommuniCare Health, Sexual Assault & Domestic Violence Center, Yolo County Dept. of Employment & Social Services, etc.)

Funding Source

Various: Yolo County Children and Families Commission, Family Preservation funds, participating agencies

Essential Components

Cases are identified by the YMART facilitator for formal presentation. Meeting includes:

- Verbal case discussion
- Gaps in services or duplication of services identified
- Collaborative recommendations

Implementation Strategies

- Identification of need by agencies
- Commitment to meet needs of families
- Collaboration agreements
- Structural development

Web Links & Contact Information

YMART
25 North Cottonwood Street
Woodland, CA 95695
www.yolocounty.org

Description

YMART began as a grassroots effort by local community-based organizations concerned about finding treatment resources, food, housing, furniture, health care, parenting and life skills education, employment training, and other needs families in complex and worsening situations; services that no one agency could provide. As these families moved from agency to agency, service providers wondered if they were duplicating the services of other local providers or if gaps in services still remained.

The success of the YMART collaboration is that it identifies potential resources and better coordinates services in support of high-risk families. YMART meets on a weekly basis to hear case reviews.

Interagency Systems Coordination

The needs of a family may require the services of a number of different agencies:

- includes public and private agencies
- promotes comprehensive assessment
- shares responsibility and accountability among the community
- requires coordination to maximize services and eliminate competing priorities for families
- improves outcomes for families
- creates a consistent and caring relationship with the family

Joint Workgroup Child Welfare Services & Alcohol and Drug Programs

Target Population

At risk children & families

Description

The recognition that substance abuse has profound effects on child abuse and neglect is evident in practices throughout public and private agencies in California. Because of the importance of the intersection between child welfare and substance abuse, the Department of Social Services convened a Joint Workgroup charged with addressing the special impact of these issues. The Joint Work Group, facilitated with the expert consultation provided through the National Center on Substance Abuse and Child Welfare (NCSACW), met and developed a set of 12 shared principles. The work done by the Workgroup was guided by nationally recognized models already developed by many California Counties. At the county level, on-going discussions between three key parties—CWS, AOD and the Dependency Courts—have been underway for more than 7 years. The recommendations of the Joint Workgroup have served to inform each of the Redesign workgroups.

The lessons of AOD-CWS collaboration can usefully be extended to many of the approaches being utilized by counties such as home visiting, family support programs/family resource centers, early childhood screening efforts, parent education, newly funded child abuse prevention initiatives under Proposition 10/First Five, and other funding sources.

A growing number of California counties are engaging in collaboration between child welfare services and alcohol and drug programs.

Essential Components

- Safety assessments include assessing for addiction
- Policies, programs and practices for children and families should be responsive to strengths, needs and address AOD abuse
- Team approach to assessment, case planning and services
- Innovative cross-agency funding strategies

Implementation Strategies

- Give priority to CWS clients in AOD treatment
- Shared accountability and responsibility
- Cross training of workers/caregivers
- Public-private partnerships
- Frequent and regular communications and forums for networking/collaboration

Web Links & Contact Information

National Center on Substance Abuse and Child Welfare
4940 Irvine Blvd., Suite 202
Irvine, CA 92620
(714) 505-3525
Nkyoung@cffutures.com

CalWORKs/Child Welfare Partnership Project

Target Population

State and County child welfare and public assistance leaders

Description

The goal of the CalWORKs/Child Welfare Partnership Project is to increase knowledge about, and implementation of practices to integrate child welfare and public assistance programs in California.

The Project was inspired by the nationally recognized program in El Paso County, Colorado, and aims to increase prevention services. The four-year Project is supported by the Stuart Foundation, launched in partnership with the California Department of Social Services, and based at the California Center for Research on Women and Families as the Public Health Institute in Berkeley, California.

Essential Components

- Statewide County Linkages Survey
- Five workgroups and statewide conference introducing published recommendations
- Ten county two-year implementation pilot grants including training and technical assistance
- Project process evaluation

Implementation Strategies

The project has two phases. The first phase included a statewide county survey to increase our knowledge of what integration practices are currently underway in California. That survey has been completed and can be viewed on the web link provided below.

Additionally, through a facilitated process with state and county experts, the first phase was to develop recommendations about how best to integrate child welfare and public assistance programs in California. Five Work Groups of the CalWORKs/Child Welfare Partnership Project provided recommendations in programmatic and policy areas identified as priorities to increase coordination of CalWORKs and Child Welfare Services. Their recommendations were released at the statewide Linkages conference on May 30, 2002, available on the web links below.

The second phase of the Project provides modest, two-year grants to support ten counties to implement the recommendations. Convenings will be organized during both years to provide county directors and coordinators with ongoing technical assistance throughout the Project.

Web links & Contact Information

CalWORKs/Child Welfare Partnership Project
California Center for Research on Women and Families (CCRWF)
1654 Solano Avenue, Suite D
Berkeley, CA 94707-2114
(510) 559-2696
ccrwf@ccrwf.org Email

The Greenbook Project

Target Population

Women and children in domestic violence situations

Setting

Accessible community based locations

Funding Source

Lucille Packard Foundation, American Public Human Services Association

CDSS and the California Alliance Against Domestic Violence have also initiated on-going discussions to promote cross system collaboration.

Essential Components

- Identification of co-occurrence of domestic violence & child abuse
- Heightened sensitivity to appropriate strategies for dealing with domestic violence situations

Implementation Strategies

- Address the co-occurrence of domestic violence and child abuse
- Policies and practices based on cross-system collaboration for identification, safety planning, case management, advocacy, and abuser accountability
- Utilize community based domestic violence experts in all aspects of project, including policy development, “expert” training and technical, public awareness, etc.

Web links & Contact Information

Santa Clara County Greenbook Project
1046 W. Taylor Street, Suite 100
San Jose, CA 95126
(408) 882-0900, x15
jsweeney@kidsincommon.org Email

City and County of San Francisco
Department of Human Services/Greenbook Project
170 Otis Street, 8th Floor
San Francisco, CA 94103, (A10A)
(415) 557-5403 Phone
Beverly_Green-Simmons@ci.sf.ca.us Email

National Council of Juvenile and Family Court Judges
Family Violence Department
P.O. Box 8970
Reno, NV 89507
888-55-GREEN or 888-55-47336
<http://www.thegreenbook.info/>

Description

The Greenbook Project, formally titled “Effective Intervention in Domestic Violence & Child Maltreatment Cases: Guidelines for Policy and Practice”, is part of a comprehensive Plan for Integrating Improved Policy and Practice in Child Protection Systems, Domestic Violence Agencies and Juvenile Dependency Courts. The plan was developed by the National Council of Juvenile and Family Court Judges, the Family Violence Prevention Fund, and the National Association of Public Child Welfare Administrators and Susan Schechter.

The goal of the demonstration projects is to test in local communities the effectiveness of the guidelines in improving collaborations and agency interventions to achieve safety for battered mothers and their children, and hold abusers accountable. Two California counties, Santa Clara County and San Francisco, were selected to implement the guidelines, conduct evaluations on the effectiveness of the guidelines in keeping battered mothers and their children safe. The participating organizations in local communities are to establish coordinated, common and consistent responses that protect, empower, and support adult and child victims of abuse.

California representatives including the Judicial Council’s Center for Children, Families and the Courts,

Appendix

Office of Child Welfare Redesign Resources

California Department of Social Services
CWS Office of Redesign Implementation
744 P Street, MS 9-888
Sacramento, CA 95814
(916) 657 1730
http://www.dss.cahwnet.gov/cdssweb/ChildWelfa_285.htm

Evidence-Based Practice

The Office of Child Welfare Redesign will embark in a multi-phased approach to developing an “evidence based practice” approach to child welfare services in California. As this approach develops, more information will be shared with counties to promote improved practice. This will begin the process of moving from “best practices” to a “practice approach” for California.

An essential element of the Redesign is the development of quality practices, tools and resources for finding and applying evidence informed research to service delivery with children and families. It also involves the integration of evidence informed research with clinical expertise and client values.

The initial phase will involve:

1. Documenting and utilizing best or promising practice guides, and research and evidence from clinical trial outcomes where available. Research Culture is the development of a culture where research is valued across the organization or department and where the pursuit of research by internal and external parties is encouraged and facilitated.

The Evidence-Based Practice cycle will be developed by CDSS by first forming a statewide advisory body to develop the criteria and support structure for the implementation of this cycle. The purpose of the cycle will be to evaluate promising practices, demonstrations, pilots and research for the purpose of:

1. Statewide replication (taking programs to scale).
2. The establishment of an effective model or approach to outcome focused child welfare practice.

From this work, CDSS will establish an Evidence Based Clearinghouse. This clearing-house will disseminate essential information to all counties.

Child Welfare Promising Practice Resources

There are many publications or searchable websites to assist you. The following links provide information about a variety of promising practices and technical assistance/training resources.

The Promising Practices Network
<http://www.promisingpractices.net>

Child Welfare League of America Research to Practice Initiative (R2P)
<http://www.cwla.org/programs/r2p>

Best Practice/Next Practice (biannual bulletin)
<http://www.cwresource.org/publications.htm>

Resource Center for Family-Focused Practice
<http://www.humanservices.ucdavis.edu/resource/index.asp>

Northern and Southern California Child Abuse Training and Technical Assistance (CATTA) Centers
<http://www.cattacenter.org/cattaabout.html>

Emerging Practices in the Prevention of Child Abuse and Neglect
<http://calib.com/nccanch/prevention/emerging/index.cfm>
U. S. Department of Health and Human Services
Administration for Children and Families
Children's Bureau's Office on Child Abuse and Neglect

Promising Bay Area Practices for the Redesign of Child Welfare Services
<http://www.smchsa.org/children/pdfs/bassc-cwr.pdf>
Bay Area Social Services Consortium (BASSC) Report

Drug Court Publications Resources Guide: Fourth Edition
<http://www.ndci.org/publications/ResourceGuide2002Edition.pdf>
<http://www.ndci.org/publications.html>
National Drug Court Institute (NDCI)

Resource and Funding Guide, June 2000
<http://www.nadcp.org/docs/resource&fund.doc>
National Association of Drug Court Professionals (NADCP)

Promising Practices for Behavioral Health Services to Children and Adolescents and Their Families in Managed Care Systems: A View from the Child Welfare System
<http://www.georgetown.edu/research/gucdc/cw2.pdf>
National Technical Assistance Center for Children's Mental Health, Georgetown University Center for Child and Human Development

Safe From the Start Reducing Children's Exposure to Violence. Promising Strategies and Programs Resource Guide
<http://www.safefromthestart.org/pubs/pdfs/promisingStrategies.pdf>
California Attorney General's Office
Crime and Violence Prevention Center

Rethinking Child Welfare Practice Under The Adoption And Safe Families Act Of 1997: A Resource Guide
<http://www.cwresource.org/Online%20publications/ASFA%20Resource%20Guide.pdf>
U. S. Department of Health and Human Services
Administration for Children and Families Children's Bureau

Seeking Better Performance Through Interagency Collaboration: Prospects and Challenges
<http://pcwta.sdsu.edu/Documents/SACHSIntegratedServicesResearchReport.pdf>
Southern Area Consortium of Human Services (SACHS)

Forming a Multidisciplinary Team To Investigate Child Abuse (Portable Guides to Investigating Child Abuse)
http://www.ncjrs.org/html/ojjdp/portable_guides/forming/contents.html
U.S. Department of Justice, Office of Justice Programs,
Office of Juvenile Justice and Delinquency Prevention

Resource and Organization Links

These organizations provide a range of child welfare information and resources; some include specific promising practices information.

http://www.dss.cahwnet.gov/cdssweb/ChildWelfa_285.htm

California Department of Social Services for Stakeholders Reports
and Child and Family Services Review Report

<http://www.cwda.org/resources.cfm>

County Welfare Directors Association of California (CWDA)

<http://www.ccrwf.org>

California Center for Research on Women and Families

<http://www.nadcp.org/>

National Association of Drug Court Professionals (NADCP)

<http://www.cwresource.org/resources-orgs.htm>

National Child Welfare Resource Center for Family-Centered Practice

<http://www.ndci.org>

National Drug Court Institute (NDCI)

<http://www.humanservices.ucdavis.edu/academy/links.asp>

Northern California Children and Family Services Training Academy

Training Resources

These are resources that can be used to obtain training and technical assistance to develop and support promising practices in your community.

Northern and Southern California Child Abuse Training
and Technical Assistance (CATTA) Centers
<http://www.cattacenter.org/cattaabout.html>

California Social Work Education Center (CalSWEC)
<http://calswec.berkeley.edu/>

Central California Training Academy, California State
University, Fresno
<http://centralacademy.org>

Bay Area Academy, San Francisco State University
<http://www.sfsu.edu/~bayacad/>

Northern California Children and Family Services
Training Academy
University of California, Davis
<http://www.humanservices.ucdavis.edu/academy>

Southern Region Public Child Welfare Training
Academy (PCWTA)
San Diego State University
<http://www-rohan.sdsu.edu/~pcwtas/courses.html>

Inter-University Consortium (California State
Universities at Long Beach and Los Angeles, University
of California, Los Angeles, and University of Southern
California)
<http://www.sppsr.ucla.edu/acad/sw/iuc/index.htm>

Resource Center for Family-Focused Practice
[http://www.humanservices.ucdavis.edu/resource/index.a
sp](http://www.humanservices.ucdavis.edu/resource/index.asp)

<http://www.cattacenter.org/cattalinks.html>
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(CATTA)

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